

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKROMAN KHAIMOV CIA SECRET SPY

15CV9001

(In the space above enter the full name(s) of the plaintiff(s).)

COMPLAINT

-against-

US Enterprise Architecture Framework
Cyberwarefare NYPD SER Cyber IDRA HP
Docomo, Microsoft Bill Gates and his family electrical
tree, Volvo, BMW, Mercedes Benz, Audi, Michael
Bloomberg, Donald Trump and his daughter
Paris, Chevy, CIA, DARPA US Military POTC
St Johns University, LIJ, Hollis Hill, Queens
Hospital FDNY, Canadian DARPA, Russian
Spy Agency DARPA Russian military KGB.
Duplication.

Jury Trial: ☐ Yes ☐ No
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Roman Khaimov

Street Address

141-63 73 Terr

County, City

Fishing NY

State & Zip Code

NY 11367

Telephone Number

(718) 600-4384

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name

US Enterprise Architecture Framework

Street Address

County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 2

Name Bill Golez
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 3

Name Donald Trump
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 4

Name Electronical Tree, Docono
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

☐ Federal Questions

☐ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? _____

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship _____

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 14663 73 Terr Flushing NY
11432, 150-27 Goodale's Avenue 11432 NY. 135-36 82nd Avenue Briarwood NY
11433

B. What date and approximate time did the events giving rise to your claim(s) occur? (since
1995 to 2015) 2015 to 1995

C. Facts: These Companies were using me in their Cyber-angor
sex cyber (seduce me to the hospital many times.
NYPD refused not to take me to the hospital for no
cause with FDNY, Donald Trump's sex cyber me Bill Gates, Michel
Bloomberg and all the above Companies.

What
happened
to you?

Who did
what?

Was anyone
else
involved?

All the Companies proceeded sex cyber, duplication.
(Knowing information I raised my hand without a
badge telling to them I am a spy I work for US Government
shall they not nor refused to obey my hand.

US and other countries European Enterprise
Architecture Framework NYPD, Donald Trump Dander Paris,
Bill Gates Family, Donald Trump's family and all the above companies,
Other country's Enterprise Architecture Framework.

Who else
saw what
happened?

FBI, CIA, (witness). Satellite spy FBI Recorded
CIA secret Central Intelligence Agency Satellite Recorded.
Whom I shall say I am recruited by FBI 1997 CIA 1990.

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

NYPD, FDNY, Took me the Hospital for no cause
over doing me with medication I shall not need
ending me with SST and medication I not nor shall
in need of them.

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

Central Intelligence Agency
to give me a secret spy badge and investigate
every template that has been done in sex cyber
within these companies

I declare under penalty of perjury that the foregoing is true and correct.

Signed this ____ day of _____, 20__.

Signature of Plaintiff

[Signature]

Mailing Address

141-63 73 Terr

Flushing NY 11367

Telephone Number

(718) 600-4384

Fax Number (if you have one) _____

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this ____ day of _____, 20__, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: _____

Inmate Number _____